

11. Please describe what happened (In response to Question 10. “Were your agency’s employees’ insurance coverage negatively affected in any way?”):

1. Employee went on unpaid FMLA and insurance was canceled Insurance premium was being deducted from employees check for 2 months - BA was alerted took 4 pay cycles to correct. Employee was double deducted for all insurance premiums
2. Employee's health insurance dropped. Employee's medications were not covered under insurance when issues surfaced. Employee's were double deducted on premiums. Employee's health coverage was changed.
3. Employees were double deducted. Children of employees were not added correctly. Medical services were delayed as a result.
4. Individuals went for medical treatment and were told they had no insurance. Further, if this occurs on a holiday or weekend it cannot be resolved until a business day.
5. Employee was unable to have prescriptions filled for chronic conditions.
6. Employee did not receive reimbursement of medical insurance premiums paid in excess for 5 months.
7. In one instance- Employee paid two months in advance. It was posted in Edison but insurance was canceled. Second instance - Employee's Sick Leave Bank was not routed to Payroll thus no paycheck generated and no insurance deducted and insurance was canceled. Third instance - Employee went from family to single coverage: paperwork timely; paperwork not entered for 5 months resulting in overpayment of premium. To date no refund.
8. Benefits call center staff have given out incorrect information which as caused employee insurance coverage to be negatively affected. Also, refunds for overcharges take extended periods of time to get repaid and require extensive follow-up by agency staff.
9. One employee was overpaid on longevity and then when the Policy 11 processed, he was disenrolled. Another employee, for no reason that anyone can determine, her dental enrollment was changed in April.
10. Doctor's appointments and prescriptions were delayed. Claims had to be resubmitted multiple times.
11. Prescription coverage was negatively impacted. Premiums had to be paid out of pocket and then were applied to vendor.
12. Several employees have called and stated that they were unable to get prescriptions,etc., due to no coverage. Each time it was a problem in the Edison system.
13. A hold was placed on their insurance.
14. We had at least one employee in each of the following categories: insurance plans changed, insurance completely dropped, dependents dropped (including a disabled child), dental insurance dropped

15. Employee's insurance was never effective and cannot get satisfaction as to appropriate date for enrollment. Benefits wants an employee who doesn't have a big paycheck to cover the insurance deductions for 6 months in one paycheck. He hasn't even used the insurance because he didn't have a card. Now, after all these months, they decided that he will have to pay for all those months that he didn't even think he had insurance. He questioned why the insurance premium was not being deducted from his check and that was in vain. Nobody wants to take responsibility for the confusion.
16. The time it took to add a dependent to an employee's insurance was lengthy which resulted in employee's not having coverage at the time they needed it. Also, this created more work hours for me because I had to continuously keep checking to see if the dependent had been added to the insurance. Some employees could not get prescriptions filled as a result. Also, former employees that opted for COBRA and signed up for ACH direct billing were not billed properly which resulted in billing errors. This also created extra workload for me because the former would call me to see if I could help straighten out the problem with Ben. Admin.
17. Employees could not get prescriptions filled.
18. One employee was unable to fill her prescriptions
19. employees insurance was dropped for no reason; didn't know until at pharmacy or in emergency room; several employees refunds delayed for multiple months
20. Transactions was keyed by DOHR for Military Leave, which this employee was not on, causing the employee loss of insurance. Another employee was separated, then reappointed, but the system did not pick up the insurance.
21. Insurance has been terminated. Cobra payments not reflected. Pending refunds. Emp. owes back premiums and still pending with Benefits.
22. Coverage delayed for months. New employees unable to obtain prescription medications and seek medical care. New dependents not added. Dependents dropped inappropriately. COBRA packets delayed, because employees left active in system for months.
23. changes not processed, double deducted, insurance dropped,